

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)						Application Number <div style="font-size: 1.2em; font-family: cursive;">10/617042</div>		Filing Date		
						Applicant(s)				
						* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1							
2		1		1						
3		2		2						
4		2		2						
5	1		1							
6		1		1						
7		2		2						
8		2		2						
9		2		2						
10		2		2						
11		2		2						
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total Indep	2		2				Total Indep			
Total Depend	16		16				Total Depend			
Total Claims	18		18				Total Claims			
51							51			
52							52			
53							53			
54							54			
55							55			
56							56			
57							57			
58							58			
59							59			
60							60			
61							61			
62							62			
63							63			
64							64			
65							65			
66							66			
67							67			
68							68			
69							69			
70							70			
71							71			
72							72			
73							73			
74							74			
75							75			
76							76			
77							77			
78							78			
79							79			
80							80			
81							81			
82							82			
83							83			
84							84			
85							85			
86							86			
87							87			
88							88			
89							89			
90							90			
91							91			
92							92			
93							93			
94							94			
95							95			
96							96			
97							97			
98							98			
99							99			
100							100			

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.